

ISSUE STATEMENT AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JH		
O.I.P.E. CLASSIFIER		43	7/5/01
FORMALITY REVIEW	TH	1118	8-10-01
RESPONSE FORMALITY REVIEW	MO	Jcrr	09/17/01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
 staple additional sheet here

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50553-112  
 8/10/01  
 29-2883  
 10/18/01